

**BUSINESS CERTIFICATE  
THE COMMONWEALTH OF MASSACHUSETTS  
TOWN OF MAYNARD  
TOWN CLERK  
195 MAIN STREET  
MAYNARD, MA 01754**

\_\_\_\_\_ 20 \_\_\_\_\_

IN CONFORMITY WITH THE PROVISIONS OF CHAPTER ONE HUNDRED AND TEN, SECTION FIVE OF THE GENERAL LAWS, AS AMENDED, THE UNDERSIGNED HEREBY DECLARE (S) THAT A BUSINESS UNDER THE TITLE OF:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_ **IS CONDUCTED AT** \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
**(NUMBER, STREET AND TOWN)**

**TELEPHONE NUMBER:** \_\_\_\_\_ **TAX ID# SSN#**  
**or FID#:** \_\_\_\_\_

**NATURE OF BUSINESS:** \_\_\_\_\_

**BY THE FOLLOWING NAMED PERSONS:**

**FULL NAME**

**RESIDENCE**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
**SIGNED:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
**(SIGNATURE)**

\_\_\_\_\_  
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\_\_\_\_\_  
**(SIGNATURE)**

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**(SIGNATURE)**

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\_\_\_\_\_  
**(SIGNATURE)**

**THE COMMONWEALTH OF MASSACHUSETTS**

**MIDDLESEX SS.**

\_\_\_\_\_ 20 \_\_\_\_\_

**PERSONALLY APPEARED BEFORE ME THE ABOVE NAMED** \_\_\_\_\_

\_\_\_\_\_  
**AND MADE THE OATH THAT THE FOREGOING STATEMENT IS TRUE.**

**A CERTIFICATE ISSUED IN ACCORDANCE WITH THIS SECTION SHALL BE IN FORCE AND EFFECT FOR FOUR YEARS FROM THE DATE OF ISSUE AND SHALL BE RENEWED EACH FOUR YEARS THEREAFTER SO LONG AS SUCH BUSINESS SHALL BE CONDUCTED AND SHALL LAPSE AND BE VOID UNLESS SO RENEWED.**

**EXPIRATION DATE:** \_\_\_\_\_

\_\_\_\_\_  
**TITLE**